| Effective October 1, 2000  |   |              |                                   |                  |                              |                              |                                       |        |                   |                        |    | •                                       |                        |     |
|--|---|--------------|-----------------------------------|------------------|------------------------------|------------------------------|---------------------------------------|--------|-------------------|------------------------|----|---|------------------------|-----|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |   |              |                                   |                  |                              |                              |                                       |        | SMALL ENTITY TYPE |                        |    | OTHER<br>SMALL                          |                        |     |
| TO   | TAL CLAIMS  |              |                                   | 10               |                              |                              |                                       | Γ      | RATE              | FEE                    | 1  | RATE                                    | FEE                    |     |
| FOR 10 10 00   |   |              |                                   | NUMBER FILED     |                              | NUMBER EXTRA                 |                                       | В      | asic fee          | 355.00                 | OR | BASIC FEE                               | 710.00                 |     |
| то   | TAL CHARGEA   | BLE C        | LAIMS                             | M min            | us 20=                       |                              |                                       | Γ      | X\$ 9=            |                        | OR | X\$18=                                  |                        |     |
| INDEPENDENT CLAIMS 2 minus 3 =   |   |              |                                   |                  |                              |                              |                                       | ſ      | X40=              |                        | OR | X80=                                    |                        |     |
| MULTIPLE DEPENDENT CLAIM PRESENT  +135= OR +270=  * If the difference in column 1 is less than zero, enter *0* in column 2  TOTAL OR TOTAL |   |              |                                   |                  |                              |                              |                                       |        |                   |                        |    |   |                        |     |
| - if   | the difference  | in colt      | ımn 1 is                          | less than ze     | ro, ente                     | r <b>"0" in c</b>            | olumn 2                               | L      | TOTAL             |                        | OR | TOTAL                                   | 710~                   | لأح |
|  | C   | LAIM         | S AS A                            | MENDED           | - PAR                        | TII                          |                                       |        | •                 |                        | •  | OTHER                                   | THAN                   |     |
|  |   |              | <u>սոր 1)</u>                     |                  | (Colu                        |                              | (Column 3)                            | _:     | SMALL             | ENTITY                 | OR | SMALL                                   |                        |     |
| AMENDMENT A  |   | REN<br>A     | AIMS<br>IAINING<br>FTER<br>NOMENT |                  | HIGH<br>NUM<br>PREVI<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA                      | L      | RATE              | ADDI-<br>TIONAL<br>FEE |    | RATE                                    | ADDI-<br>TIONAL<br>FEE |     |
| NO.  | Total   | • 1          | 0                                 | Minus            | 6                            | <del>)</del> 0               | =                                     |        | X\$ 9=            |                        | OR | X\$18=                                  |                        |     |
| ME   | Independent   | •            | ₽_                                | Minus            | •••                          | 3                            | =                                     | Γ      | X40=              |                        | OR | X80 <del>-</del>                        |                        |     |
| L  | FIRST PRESE   | <del>7</del> | *                                 | ULTIPLE DEF      | PENDEN                       | TCLAIM                       |                                       | T      | +135=             |                        | OR | +270=                                   |                        |     |
| G  | 2/03/01   | أفرح         | ,                                 |                  |                              |                              |                                       | L      | TOTAL<br>DIT. FEE |                        | ΛB | YOTAL<br>ADDIT, FEE                     |                        |     |
|  |   |              | iumn 1)                           |                  | (Colu                        | mn 2)                        | (Column 3)                            |        |                   |                        |    | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                        |     |
| AMENDMENT B  |   | REN<br>A     | AIMS<br>MAINING<br>FTER<br>NOMENT |                  | NUM<br>PREVI                 | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA                      |        | RATE              | ADDI-<br>TIONAL<br>FEE |    | RATE                                    | ADDI-<br>TIONAL<br>FEE |     |
| MQ.  | Total   | ٠ ٥          | 20                                | Minus            | <b></b> 2                    | 0                            | ~~                                    | ı      | X\$ 9=            | •                      | OR | X\$18=                                  |                        |     |
| ME   | Independent   | ·            | 9                                 | Minus            | •••                          | 3                            | 2                                     | T      | X40≈              |                        | OR | X80=                                    | 84                     |     |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM              |              |                                   |                  |                              |                              |                                       |        |                   |                        | OR | +270=                                   |                        | ľ   |
| •  | 02/27   | 0.           | 4                                 |                  |                              |                              |                                       | L<br>A | YOTAL             | ·                      | OR | YOYAL<br>ADDIT, FEE                     |                        | 84  |
|  | •   |              | lumn 1)                           | •                | (Colu                        | mn 2)                        | (Column 3)                            | ~.     |                   |                        |    |   |                        |     |
| AMENDMENT C  |   | REN          | AIMS<br>AAINING<br>FTER<br>NOMENT |                  | HIGH<br>NUM<br>PREVI         | (ESY<br>(BER<br>OUSLY<br>FOR | PRESENT<br>EXTRA                      | ľ      | RATE              | ADDI-<br>TIONAL<br>FEE |    | RATE                                    | ADDI-<br>TIONAL<br>FEE |     |
| ΨĢ   | Total   | •            | 6                                 | Minus            | 7                            |                              | = Q                                   | , [    | X\$ 9=            |                        | OR | X\$18=                                  |                        |     |
| ME   | Independent   | $\cdot$      | 'U                                | Minus            | •••                          | 4                            | = ()                                  | 1      | X40=              |                        | OR | X80=                                    |                        |     |
| Ľ  | FIRST PRESE   | NTATI        | ON OF M                           | ULTIPLE DE       | PENDEN                       | T CLAIM                      |                                       | -      | 405               |                        |    | .070                                    |                        | 1   |
| • 1  | I the entry in colu   | mn 1 ie      | loss than fi                      | he entry in coli | ino 2 writ                   | n W in co                    | tumn 3.                               | L      | +135=<br>TOTAL    | 400                    | OR | +270=                                   |                        | 4   |
| **   | if the "Highest Nu<br>if the "Highest Nu<br>The "Highest Nu | mber Pr      | reviously Parentinusty P          | aid For IN THI   | S SPACE                      | is less that<br>is less the  | n 20, enier "20."<br>In 3, enier "3." |        | DIT. FEE          | monata ha              |    | ADDIT. FEE                              |                        | 1   |

Application of Docket Number

|  |  |                               |                    |       |                | Application or Docket Number           |                  |              |                  |                        |                           |                             |                        |
|--|--|-------------------------------|--------------------|-------|----------------|--|------------------|--------------|------------------|------------------------|---------------------------|-----------------------------|------------------------|
| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2004  09 686 123   |  |                               |                    |       |                |  |                  |              |                  |                        |                           |                             |                        |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |                               |                    |       |                |  |                  |              |                  | ENTITY                 | OR                        | OTHER<br>SMALL              |                        |
| FOR NUMBER FILED NUMBER EXTRA  |  |                               |                    |       |                |  | EXTRA            | F            | RATE             | FEE                    |                           | RATE                        | FEE                    |
|  | C FEE  | , ,                           |                    |       |                |  |                  |              | 395.00           | OR                     |                           | 790.00                      |                        |
| TOTA   | AL CLAIMS  |                               | 12                 | minus | :20            | • -6                                   | X:               | \$11=        |                  | OR                     | x\$22=                    |                             |                        |
| INDE   | PENDENT CL   | AIMS                          | Y minus Y          |       |                | · •                                    |                  |              | 41=              |                        | -                         | x82=                        |                        |
| MULT   | TIPLE DEPEND   | ENT CLA                       | IM PRE             |       |                | <u> </u>                               |                  |              |                  |                        | OR                        |                             |                        |
| If the difference in column 1 is less than zero, enter "0" in column 2   |  |                               |                    |       |                |  |                  |              | 135=             |                        | OR                        | +270=                       |                        |
|  |  |                               |                    |       |                |  |                  |              | OTAL             |                        | OR                        | TOTAL                       | 0                      |
| 1()  | CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) |                               |                    |       |                |  |                  |              | SMALL            | ENTITY                 | OR                        |                             | R THAN<br>ENTITY       |
| AMENDMENT A  |  | CLAI<br>REMAI<br>AFT<br>AMEND | NING<br>ER         |       | PRE            | GHEST<br>UMBER<br>EVIOUSLY<br>AID FOR  | PRESENT<br>EXTRA | F            | RATE             | ADDI-<br>TIONAL<br>FEE |                           | RATE                        | ADDI-<br>TIONAL<br>FEE |
| NO.  | Total  | . 12                          | 2                  | Minus | ••             | 20                                     | = 0              | x:           | \$11=            |                        | OR:                       | x\$22=                      | . !                    |
| ME   | independent  | • 4                           | -                  | Minus | ***            | 4                                      | <b>=</b> 🕣       | ×            | 41=              |                        | OR                        | x82=                        |                        |
| ٨  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM               |                               |                    |       |                |  |                  |              | 135=             |                        | OR                        | +270=                       |                        |
|  |  | (Colun                        | nn 1)              |       | ıc             | olumn 2)                               | (Column 3)       | ADD          | TOTAL            |                        | OR                        | TOTAL<br>ADDIT. FEE         | Ð                      |
| NDMENT B   |  | CLAI<br>REMAI<br>AFT<br>AMEND | IMS<br>INING<br>ER |       | HI<br>N<br>PRE | IGHEST<br>UMBER<br>EVIOUSLY<br>AID FOR | PRESENT<br>EXTRA | ş            | RATE             | ADDI-<br>TIONAL<br>FEE |                           | CLAIMS<br>ALLAANS<br>RATEGA | .⊊AΦDI-                |
| MO   | Total  | •                             |                    | Minus | ••             |  | =                | ×            | \$11=            |                        | OR                        | x\$22=                      | :                      |
| AMEN   | independent  | •                             |                    | Minus | •••            |  | =                | <b>   </b> , | (41=             | -                      | OR                        | x82=                        |                        |
| <b>_</b>   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM               |                               |                    |       |                |  |                  |              | 135=             |                        | OR                        | +270=                       |                        |
|  | (Column 1) (Column 2) (Column 3)                             |                               |                    |       |                |  |                  |              | TOTAL<br>NT. FEE |                        | OR                        | TOTAL<br>ADDIT. FEE         |                        |
| AMENDMENT C  |  | CLAI<br>REMAI<br>AFT<br>AMEND | INING<br>ER        |       | N<br>PRE       | IGHEST<br>UMBER<br>EVIOUSLY<br>AID FOR | PRESENT<br>EXTRA | ,            | RATE             | ADDI-<br>TIONAL<br>FEE |                           | RATE                        | ADDI-<br>TIONAL<br>FEE |
| ŌM   | Total  | ٠                             |                    | Minus | ••             |  | =                | X            | \$11=            |                        | OR                        | x\$22=                      |                        |
| ME   | Independent  | •                             |                    | Minus | •••            |  | =                | ]   ,        | (41=             |                        | OR                        | x82=                        |                        |
| 4  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM               |                               |                    |       |                |  |                  |              | 135=             |                        | OR                        | +270=                       |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 3.  *** If the entry in column 3.  *** TOTAL ADDIT. FEE |  |                               |                    |       |                |  |                  |              |                  |                        | TOTAL<br>ADDIT. FEE<br>1. |                             |                        |